UTILITY	Attorney Docket No.		DEP652CON		0 4 4		
PATENT APPLICATION	First Inventor		Jon C. Serbousek		103,		
TRANSMITTAL	Title		Prosthesis with Feature Aligned to Trabeculae		5. 7.0		
(only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No		EU813686139US		10/		
APPLICATION ELEMENTS		ADD	RESS TO: Mail S	Stop Patent Applicatio	153		
See MPEP Chapter 600 concerning utility patent application contents.		Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
1. E Fee Transmittal Form (e.g., PTO/SB/17) (submit an original and a duplicate for fee processing)		7. [7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)				
2. Applicant claims small entity status.		8. Nucleotide and/or Amino Acid Sequence					
3. Specification [Total Pages 31 including cover page]		Submission (if applicable, all necessary)					
(Preferred arrangement set forth below)		a.□	a. Computer Readable Form (CRF)				
 Descriptive Title of the Invention Cross Reference to Related Applic 	ations	b	b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or				
 Statement Regarding Fed sponsor 	ed R&D		ii. paper				
 Reference to sequence listing, a ta 	ble, or a	c.□	c. Statement verifying identity of above copies				
computer program listing appendix - Background of the Invention	•	ACCOMPANYING APPLICATION PARTS					
- Brief Summary of the Invention			9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of Attorney				
 Brief Description of the Drawings (in a second control of the Drawings) Detailed Description 	t tiled)	10.	37 CFR 3.73(b) Si (when there is an a		Attorn		
- Claim(s)		11.[11. English Translation Document (if applicable)				
 Abstract of the Disclosure 		12.	12. Information Disclosure Statement				
4. Drawing(s)(35 USC 113) [Total		13 [(IDS)/PTO-1449			JI 15	
5. Oath or Declaration [Total a. ☐ Newly executed (original or cop	Pages 4]	_	13.☐ Preliminary Amendment 14.⊠ Return Receipt Postcard (MPEP 503)				
b. 🛛 Copy from a prior application (3	7 CFR 1.63(d))	(Should be specifically itemized) 15.☐ Certified Copy of Priority Document(s)					
(for continuation/divisional with Box 18 completed)			if foreign priority is				
i. DELETION OF INVENTOR(S) Signed statement attached deleting			Request and Cert	ifications under 35 U.S	S.C. 12	22	
inventor(s) named in the prior application,			(b)(2)(B)(i). Applic PTO/SB/35 or its	cant must attach form			
see 37 CFR 1.63(d)(2) and 1.33(b).			Other	cquivalent.			
G Anniestian Data Chast	CED 1 76						
6. ☐ Application Data Sheet. See 37	ck appropriate be	ox and	supply the requisite info	ormation below and in a	·····		
preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: ☑ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No.: 09/989,123, filed 11-20-							
☐ ☑ Continuation ☐ Divisional ☐ Continuo	uauon-m-Part (OIF) 0	і рпогарріісацоп 140	00/303, 123, III60 1 1			
Prior application information: Examiner	Melson, Candic		Group Art Unit: 3732	and the state of t	h		
For CONTINUATION or DIVISIONAL API oath or declaration is supplied under Box	S only: The e	ntire di ed a pr	sclosure of the prior i	application, from whic of the accompanying	n an		
continuation or divisional application and i	is hereby incorp	oorated	I by reference. The i	ncorporation <u>can only</u>	be		
relied upon when a portion has been inadvertently omitted from the submitted application parts.							
	CORRESPON			dress below			
□ Customer Number or Bar Code Label 000027777 or □ Correspondence Address below □ Philip S. Johnson, Esq.							
Address: Johnson & Johnson							
One Johnson & Johnson Plaza							
New Brunswick, NJ 08933-7003 USA							
20. TELEPHONE CONTACT Please direct all telephone calls or telefaxes to John Wagley at:							
Telephone: (574)372-7332 Fax: (574) 372-7596							
21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED							
NAME John S. Wagley Reg. No. 36,043							
SIGNATURE John & Willes							
DATE September 24, 20	003						
DAIL September 24, 20							

FEE TRANSMITTAL Filing Date First Named Inventor Group Art Unit Examiner Name Attorney Docket Number DEP 652CON

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$750.00
TOTAL CLAIMS	21 - 20 =	1	x 18.00	\$ 18.00
INDEPENDENT CLAIMS	5 - 3 =	2	x 84.00	\$ 168.00
MULTIPLE DEPENDENT CLAIMS		/A	\$280.00	
			TOTAL FEES	\$936.00

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/DEP652CON/JSW in the amount of \$936.00. Three copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/DEP652CON/JSW. Three copies of this sheet are enclosed.

SUBMITTED E	BY:		Complete (if applicable)
Typed or Printed Name	John S. Wagley		Reg. No. 36,043
Signature	John S. Wyley	Date: September 24, 2003	Deposit Account No. 10-0750
	0 0		